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FORM D

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

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Estimated average burden hours per response. 16.00

FORM D NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR hours per response..... SEC USE ONLY Prefix Serial DATE RECEIVED

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SECTION 4(6), AND/OR 1086 UNIFORM LIMITED OFFERING EXEMPTION Name of Offering (Check if this is an amendment and name has changed, and indicate change.) INSITE ONE, INC., SERIES C PREFERRED Rule 504 Rule 505 Rule 506 Section 4(6) ULOE Filing Under (Check box(es) that apply): Type of Filing: New Filing | Amendment 8 2003 A. BASIC IDENTIFICATION DATA Enter the information requested about the issuer Name of Issuer (check if this is an amendment and name has changed, and indicate change.) 187 INSITE ONE, INC. Address of Executive Offices Telephone Number (Including Area (Number and Street, City, State, Zip Code) 135 NORTH PLAINS INDUSTRIAL ROAD, WALLINGFORD, CT 06492 (203) 265–1000 Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) (if different from Executive Offices) Brief Description of Business digital storage of medical records Type of Business Organization other (please specify): XX corporation limited partnership, already formed business trust limited partnership, to be formed П THOMSON Month Year FINANCIAL Actual or Estimated Date of Incorporation or Organization: DI2 DIO & Actual DEstimulation of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: Actual or Estimated Date of Incorporation or Organization: Actual Estimated

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 774(6)

CN for Canada; FN for other foreign jurisdiction)

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

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Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

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A. BASIC IDENTIFICATION DATA		The second section is
2. Enter the information requested for the following:		
• Each promoter of the issuer, if the issuer has been organized within the past five years;		
• Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or a	more of a clas	s of equity securities of the issuer.
Each executive officer and director of corporate issuers and of corporate general and managing partr	ners of partne	rship issuers; and
Each general and managing partner of partnership issuers.	-	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Dire	ector	General and/or Managing Partner
Full Name (Last name first, if individual)		
COOK, DAVID S.		
Business or Residence Address (Number and Street, City, State, Zip Code) 135 North Plains Industrial Road, Wallingford, CT 06492		
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Dire	ector	General and/or Managing Partner
Full Name (Last name first, if individual)		
VILLANO, THOMAS		
Business or Residence Address (Number and Street, City, State, Zip Code)		
135 North Plains Industrial Road, Wallingford, CT 06492		
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer St Direction	ector	General and/or Managing Partner
Full Name (Last name first, if individual)		
MULLIGAN, C. WILLIAM Business or Residence Address (Number and Street, City, State, Zip Code)		
• • • • • • • • • • • • • • • • • • • •	020	
5900 Landerbrook Drive, Suite 200, Cleveland, OH 44124-4		Conseled
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Dire	etor [General and/or Managing Partner
Full Name (Last name first, if individual)		
LAWRENCE, LARRY J.		
Business or Residence Address (Number and Street, City, State, Zip Code)		
40 Brookridge Drive, Greenwich, CT 06830		
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Dire	ector	General and/or Managing Partner
Full Name (Last name first, if individual)		
GOLDSTEIN, BERNARD		
Business or Residence Address (Number and Street, City, State, Zip Code)		
2 Manursing Way, Rye, NY 10580		
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Dire	ector	General and/or Managing Partner
Full Name (Last name first, if individual)		
PRIMUS CAPITAL FUND IV LIMITED PARTNERSHIP		
Business or Residence Address (Number and Street, City, State, Zip Code)		
5900 Landerbrook Drive, Suite 200, Cleveland, OH 44124-	-4020	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Dire	ector	General and/or Managing Partner
Full Name (Last name first, if individual) ALLEGRA CAPITAL PARTNERS IV, L.P.		
Business or Residence Address (Number and Street, City, State, Zip Code) 40 Brookridge Drive, Greenwich, CT 06830		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

					B. II	NFORMAT	ION ABOU	T OFFERI	NG				
1.	. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?									••••••	Yes	No 🔀	
	Answer also in Appendix, Column 2, if filing under ULOE.												_
2.	What is the minimum investment that will be accepted from any individual?											<u>\$ 12,</u>	000.00
3.	Does the	e offering j	permit joint	ownershi	p of a sing	le unit?						Yes ∑	No
4.	Enter th	e informat	ion request	ed for eac	h person w	ho has bee	n or will b	e paid or g	given, dire	ctly or ind	irectly, any he offering.		_
	If a perso	on to be lis	ted is an ass	ociated pe	rson or age	nt of a brok	er or deale	r registered	I with the S	EC and/or	with a state		
	If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.												
Ful	l Name (I	Last name	first, if indi	vidual)	-								
Bus	siness or l	Residence	Address (N	umber and	l Street, Ci	ty, State, Z	Cip Code)						
Nar	ne of Ass	ociated Br	oker or Dea	aler				_		·			<u> </u>
Cto		:-t- D	Listed Has	C-1:-:4-d	Indondo	4- C-1:-:4	D.,						
Sta			" or check						***************************************				l States
	AL	AK	AZ	ĀR	ĈA	CO	CT	DE	DC	FL	GA	HI	ID
	IL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT]	NE SC	NV SD	NH TN	NJ TX	NM UT	NY VT	NC VA	ND WA	OH WV	OK)	OR WY	PA PR
E1			first, if indi										
r ui	i Name (i	Last manne		viduai)									
Bus	siness or	Residence	Address (N	lumber an	d Street, C	ity, State, 2	Zip Code)						
Nai	me of Ass	sociated Br	oker or Dea	aler									
Sta	tes in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers		<u> </u>				
	(Check	"All States	" or check	individual	States)		***************************************		***************************************	•••••••			l States
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
	IL MT	IN NE	IA NV	KS NH	KY NJ	LA NM	ME NY	MD NC	MA ND	MI OH	MN OK	MS OR	MO PA
	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR
Ful	l Name (I	Last name	first, if indi	vidual)									
Bu	siness or	Residence	Address (N	Number an	d Street, C	lity, State,	Zip Code)			 	······································		
Nai	me of Ass	ociated Br	oker or Dea	aler									

Sta			Listed Has " or check									Al	l States
	<u> </u>												
	AL IL	AK IN	[AZ]	(AR)	CA KY	LA	CT ME	DE MD	DC MA	FL MI	GA MN	MS MS	ID MO
	MT	NE	NV	NH	NJ	NM	NY	NC VA	ND	OH	OK.	OR WY	PA
	RI	SC	SD	TN	TX	UT	∇T	VA	WA	WV	WI	WY	PR

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check		
	this box \(\) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	ancady exchanged.	Aggregate	Amount Already
	Type of Security	Offering Price	Sold
	Debt		\$
	Equity		\$
	Common Preferred		
	Convertible Securities (including warrants) Series C Convertible Preferred	5,000,000	_{\$} 3,957,067
	Partnership Interests)	\$
	Other (Specify)		
	Total	5,000,000	\$3,957,067
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
		Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	26	\$3,957,067
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)	26	\$ <u>3,957,067</u>
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505	<u> </u>	\$
	Regulation A		\$
	Rule 504		\$
	Total		\$
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees	<u>X</u>	\$
	Printing and Engraving Costs	····· 🛣	\$_2,500
	Legal Fees	X	\$ 35,000
	Accounting Fees	X	\$ 10,000
	Engineering Fees	\	\$
	Sales Commissions (specify finders' fees separately)		\$ <u> </u>
	Other Expenses (identify)	_	\$
	Total		\$ 47,500

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND I	use of proceeds	
	b. Enter the difference between the aggregate offering price given in response to Part C — Quand total expenses furnished in response to Part C — Question 4.a. This difference is the "adjust proceeds to the issuer."	sted gross	§3,909,567
5.	Indicate below the amount of the adjusted gross proceed to the issuer used or proposed to be each of the purposes shown. If the amount for any purpose is not known, furnish an estimate the box to the left of the estimate. The total of the payments listed must equal the adjust proceeds to the issuer set forth in response to Part C — Question 4.b above.	mate and	
		Payments Officers, Directors, Affiliates	& Payments to
	Salaries and fees	. \$=	X T\$
	Purchase of real estate		
	Purchase, rental or leasing and installation of machinery and equipment	-	
	Construction or leasing of plant buildings and facilities		
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)		
	Repayment of indebtedness		
	Working capital		
	Other (specify):		- ,
		 [§	& \$
	Column Totals	<u>2</u> \$ <u></u>	<u>₹</u> 3,909,567
	Total Payments Listed (column totals added)		\$, 909 , 567
	D. FEDERAL SIGNATURE		
sig	ne issuer has duly caused this notice to be signed by the undersigned duly authorized person. If the grature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange information furnished by the issuer to any non-accredited investor pursuant to paragraph (e Commission, upon w	
Loc	Supr (Print or Type)	Dote	

Issuer (Print or Type)

InSite One, Inc.

Name of Signer (Print or Type)

David S. Cook, Jr.

Signature

March 7, 2003

President

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

		E. STATE	SIGNATURE			
1.	Is any party described in 17 CFR 230.262 pre provisions of such rule?		•	=	Yes	No
	See A	Appendix, Colur	nn 5, for state r	esponse.		
2.	The undersigned issuer hereby undertakes to fu D (17 CFR 239.500) at such times as required	•	administrator (of any state in which this noti	ce is filed a no	tice on Form
3.	The undersigned issuer hereby undertakes to fissuer to offerees.	furnish to the sta	ite administrato	rs, upon written request, inf	formation furn	ished by the
4.	The undersigned issuer represents that the issi limited Offering Exemption (ULOE) of the sta of this exemption has the burden of establishing	te in which this	notice is filed a	nd understands that the issue		
	er has read this notification and knows the conter thorized person.	nts to be true and	has duly caused	this notice to be signed on its	s behalf by the	undersigned
Issuer (Print or Type)	Signature	1	Date		
InSit	te One, Inc.	4	0/	March	7, 2003	
Name (Print or Type)	Title (Print or	Type)			

President

Instruction:

David S. Cook, Jr.

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

				AI	PPENDIX					
1	Intend to non-a investor	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		4 Type of investor and amount purchased in State (Part C-Item 2)				5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
AL										
AK										
AZ										
AR										
CA			Series C Convertible Pref.	1	\$25,003	0	0		х	
СО										
СТ		х	Series C Convertible Pref	. 10	\$2,345,028	0	0		х	
DE										
DC										
FL										
GA			Series C Convertible Pref.	11	\$175,021	0	0		x	
HI										
ID										
IL										
IN										
IA										
KS										
KY										
LA								,,,,,		
ME										
MD		x	Series C Convertible Pref	1	\$25,000	0	0		х	
MA										
MI										
MN										
MS										
	<u> </u>			·				·		

				APP	ENDIX				
1	Intend to non-a investor	I to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)					lification ate ULOE attach attion of granted)
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
МО									
МТ									
NE									
NV									
NH			_						
NJ									
NM									
NY		х	Series C Convertible Pref	. 8	\$612,014	0	0		x
NC									
ND			Series C						
ОН		х	Convertible Pref	. 4	\$725,000	0	0		х
OK									
OR	-		Series C						
PA		х	Convertible Pre	. 1	\$50,000	0	0		х
RI							<u> </u>		
SC									
SD						<u> </u>			
TN	: 								
TX	_						! : 		
UT	<u> </u>								
VT									
VA									
WA									
wv									
WI									

				APP)	ENDIX				
1	Intend to non-a investor	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)			5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
WY									
PR									